

Division of Corporations

Page 1 of 2

**L150077595**

**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H15000249466 3)))



H150002494663ABC4

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : JOHNSON, POPE, BOKOR, RUPPEL & BURNS, LLP.  
Account Number : 076666002140  
Phone : (727) 461-1818  
Fax Number : (727) 441-8617

RECEIVED

15 OCT 19 PM 3:46

OFFICE OF THE  
CLERK OF THE  
SUPREME COURT  
JAN 10 2016

\*\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please\*\*\*

Email Address: Jenfoxtwr@hotmail.comRECEIVED  
OFFICE OF THE  
CLERK OF THE  
SUPREME COURT  
JAN 10 2016

15 OCT 19 PM 8:03

FILED

**FLORIDA LIMITED LIABILITY CO.****John G. Fox. M.D., PLLC**

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 0        |
| Page Count            | 02       |
| Estimated Charge      | \$125.00 |

(((H15000249466 3)))

**ARTICLES OF ORGANIZATION  
OF  
JOHN G. FOX, M.D., PLLC**

**The undersigned hereby certifies that he is the Member who is forming a Professional Limited Liability Company under Chapters 605 and 621, Florida Statutes. The following Articles of Organization are hereby adopted.**

**ARTICLE  
NAME**

**The name of the Professional Limited Liability Company shall be John G. Fox, M.D., PLLC.**

**ARTICLE  
DURATION; EFFECTIVE DATE**

**This Professional Limited Liability Company shall exist perpetually commencing as of the date of filing.**

**ARTICLE  
ADDRESS; PRINCIPAL OFFICE**

**The mailing address of the Professional Limited Liability Company and the street address of the principal office of the Limited Liability Company is 612 Druid Road East, Suite B, Clearwater, FL 33756.**

**ARTICLE  
INITIAL REGISTERED OFFICE AND REGISTERED AGENT**

**The address of the initial registered office of the Professional Limited Liability Company is 612 Druid Road East, Suite B, Clearwater, FL 33756, and the name of its initial registered agent at such address is John G. Fox, M.D.**

**ARTICLE V.  
PURPOSE**

**This Professional Limited Liability Company is organized for the purpose of owning a membership interest in Pinellas County Primary Care and Hospitalists, PLLC, a Florida Professional Limited Liability Company, and to operate a group medical practice through Pinellas County Primary Care and Hospitalists, PLLC, along with such other activity or business permitted under the laws of the United States of America and of this State as the Members may determine.**

(((H15000249466 3)))

((H15000249466 3)))

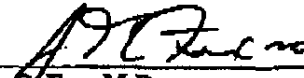
**ARTICLE VI  
RESTRICTIONS ON MEMBERSHIP;  
RIGHT TO ADMIT ADDITIONAL MEMBERS**

Members must be licensed to practice medicine in the State of Florida. A member's interest in the Professional Limited Liability Company may not be sold or otherwise transferred except to a person licensed to practice medicine in the State of Florida and only in accordance with the provisions of the Operating Agreement of this Professional Limited Liability Company.

The undersigned, being the Member of the Professional Limited Liability Company, hereby certifies that the foregoing constitutes the Articles of Organization of John G. Fox, M.D., PLLC.

Executed by the undersigned on October 15, 2015.

**MEMBER**

  
\_\_\_\_\_  
John G. Fox, M.D.

**ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT  
ACKNOWLEDGMENT OF REGISTERED AGENT**

Pursuant to Chapters 605 and 621, Florida Statutes, I agree to act in the capacity of Registered Agent for John G. Fox, M.D., PLLC and will comply with the provisions of all statutes relative to the proper and complete performance of my duties. I am familiar with and accept the obligations of Section 605.0113 Florida Statutes.

DATED this 15 day of October, 2015.

  
\_\_\_\_\_  
John G. Fox, M.D.

3204410v4

**FILED**  
15 OCT 19 PM 8:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

((H15000249466 3)))